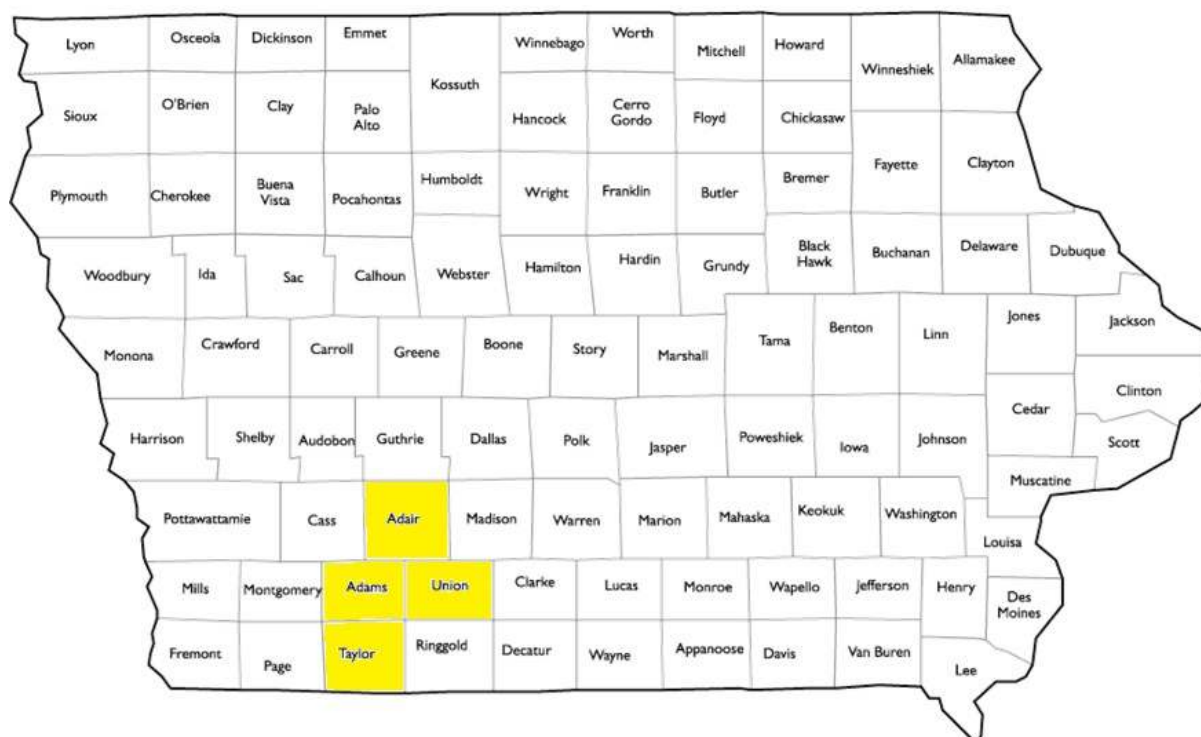


Southern Hills Regional Mental Health Mental Health and Disability Services

Annual Service and Budget Plan FY 2016 Amended 5/18/15

Geographic Area: Adair, Adams, Taylor and Union Counties



Introduction

Southern Hills Regional Mental Health (SHRMH) was formed under Iowa Code Chapter 28E to create a Mental Health and Disability Service Region in compliance with Iowa Code 331.390.

In compliance with IAC 441-25 the SHRMH Management Plan includes three parts: Annual Service and Budget Plan, Annual Report and Policies and Procedures Manual. The Annual Service and Budget Plan includes the services to be provided and the cost of those services, local access points, Targeted Case Management agencies, a plan for ensuring effective crisis prevention and a description of the scope of services, projection of need and cost to meet the need, and provider reimbursement provisions.

The Annual Service and Budget Plan has been approved by the SHRMH governing board and is subject to approval by the Director of Human Services.

SHRMH management plans are available at the SHRMH office, each member county Auditor's office and on the DHS website at dhs.iowa.gov

Access Points

An access point is a part of the service system or community that shall be trained to complete the Mental Health and Disability Services (MHDS) funding applications for persons with a disability and forward them to SHRMH office.

SHRMH shall designate the access points and their function(s) in the enrollment process.

Access Point	Address	Phone number
Adair County Public Health	117 NW Hayes, Greenfield, Iowa 50849	641-743-6173
Adams Taylor Union Case Management	Courthouse 500 Ninth St., P.O. Box 423, Corning, Iowa 50841	641-322-4203
Crossroads Mental Health Center	1003 Cottonwood Rd., Creston, IA 50801 Main Office	641-782-8457
	117 NW Hayes St., Greenfield, Iowa 50849	
	619 Court, Bedford, IA 50833	
	810 E. VanBuren, Lenox, IA 50851	
	603 David, Corning, IA 50841	
Crossroads Integrated Health Home	1003 Cottonwood Rd., Creston, IA 50801	641-278-1193

Targeted Case Management

SHRMH offers access to cost effective, evidenced based, conflict free Targeted Case Management as described in IAC 441-25.21(1)g.

Designated Case Management agencies serving the SHRMH are accredited according to the rules of the Department of Human Services. Targeted Case Managers meet the qualifications as defined in IAC 441.24. Targeted Case Management and Service Coordination Services meet the following expectations:

- Performance and outcome measures relating to the safety, work performance, and community residency of the individuals receiving the service.
- Standards including but not limited to social history, assessment, service planning, incident reporting, crisis planning, coordination, and monitoring for individuals receiving the services.
- Methodologies for complying with the requirements of sub rule 441-25.21 g, which may include the use of electronic recording keeping and remote or internet based training.

SHRMH has identified and designated the following providers for case management in the SHRMH region:

- Adams/Taylor/Union Case Management
- Department of human Services Case Management

TCM Contact Information	Address	Phone number
Adams/Taylor/Union Case Management	500 Ninth Street, Corning, Iowa 50841	641-322-4203
Department of Human Services Case Management	116 N. Market, Audubon, Iowa 50025	712-563-4600

Crisis Planning

Emergency Services

Current basic crisis response provisions, including 24 hour access to crisis response and evaluation, is provided through Community Mental Health Centers and providers listed below.

Area	Provider	Location	Phone
Adair, Adams, Taylor, Union Co.	Crossroads Mental Health Center (outpatient crisis response) 24-hour telephone access using listed Creston phone number.	Creston, Corning, Lenox and Bedford Main office: 1003 Cottonwood Road, Creston, Iowa 50841	641-782-8457
Creston	Greater Regional Medical Center Emergency Room	1700 W. Townline, Creston, Iowa	641-782-7091
Corning	Alegent Health Hospital Emergency Room	603 Rosary Drive, Corning, Iowa	641-322-3121
Greenfield	Adair County Memorial Hospital Emergency Room	609 South East Kent, Greenfield, Iowa	641-743-2123

Southern Hills Regional Mental Health has involved all parties listed above in addition to magistrates, law enforcement and other stakeholders to ensure every effort is made to prevent in-patient hospitalization in a crisis. This includes involving our CMHC to interact with consumers and family members in a crisis situation with a plan to de-escalate and divert to immediate outpatient services if possible.

Crossroads Mental Health Center will provide follow-up contact services after immediate crisis resolution to ensure the most appropriate outcome. This may include outpatient services and/or referral to other service providers as needed and appropriate.

Scope of Services and Budget for FY 16

SHRMH continues in the development and expansion stage of standardization and regionalization. The FY 16 budget was developed at the local level with input and collaboration with stakeholders to assess needs. Stakeholder/provider meetings were held on a monthly basis. Current services were evaluated and future needs were discussed. The projection of need and cost was incorporated into the Service Domains Core Chart below. Collaboration will continue to assess future projection of needs based on meeting the access standards as outlined in IAC 441-25.3.

As the funder of non-Medicaid services, SHRMH is the funder of last resort. SHRMH recognizes the importance of individualized planning for services and supports to empower all individuals to reach their fullest potential.

SHRMH shall be responsible for funding only those services and supports that are authorized in accordance with the process described in the MH/DS Plan, within the constraints of budgeted dollars. SHRMH shall be the funder of last resort and regional funds shall not replace other funding that is available. An individual who is eligible for other privately or publicly funded services and support must apply for and accept such funding and support and comply with requirements to remain eligible for such funding and support.

SHRMH shall work to assess the needs of each consumer and strive to utilize all methods of supports and reimbursement including, but not limited to, natural supports, Medicaid and private insurance, and shall help the consumer apply for all appropriate funding and supports before providing regional funding if no other funding sources are identified.

SHRMH has contracted with Integrated Telehealth Partners beginning in FY16 to provide tele-psych services in hospital emergency rooms within the region. Statistics from ITP show that this drastically cuts down on the waiting time for persons presenting to the emergency room in crisis. The instant availability of a psychiatrist via tele-health shortens the bed-finding time, possibly alleviates the need for a hospitalization, and provides follow-up plans for those not needing hospitalization before they leave the emergency room. ITP is being considered for providing these services in jail settings as well.

Service Domains Core

Priority Services	Description	Target Populations MI ID	Additional Population DD	Access Standards	Budgeted Funds
Assessment and evaluation (psychiatric or psychological evaluations and standard functional assessment)	The clinical review by a mental health professional of the current functioning of the individual using the service in regard to the individual's situation, needs, strengths, abilities, desires and goals to determine the appropriate level of care.	X	X	Assessment completed within 90 days of notice of enrollment. Individual who has received inpatient treatment shall be assessed within 4 weeks.	Included in Crossroads Block Grant.
Case management (targeted case management and service coordination)	Service provided by a case manager who assists individuals in gaining access to needed medical, social, educational, and other services through assessment, development of a care plan, referral, monitoring and follow-up using a strengths-based service approach that helps individuals achieve specific desired outcomes leading to a healthy self-reliance and interdependence with their community.	X		Service Coordination: Individuals shall not have to travel more than 30 miles if residing in an urban area or 45 miles if residing in a rural area. Individuals shall receive service coordination within 10 days of initial request for such services or being discharged from an inpatient facility	\$37,000
Crisis evaluation (tele-health)	The process used with an individual to collect information related to the individual's history and needs, strengths, and abilities in order to determine appropriate services or referral during an acute crisis episode.	X	X	Within 24 hours	Initial buy-in of 88,000 then small per-use fee to county.

Day habilitation	Services that assist or support the individual in developing or maintaining life skills and community integration. Services shall enable or enhance the individual's functioning, physical and emotional health and development, language and communication development, cognitive functioning, socialization and community integration, functional skill development, behavior management, responsibility and self-direction, daily living activities, self-advocacy skills, or mobility.	X			4,500
Family support	Services provided by a family support peer specialist that assists the family of an individual to live successfully in the family or community including, but not limited to, education and information, individual advocacy, family support groups, and crisis response.	X	X		Included in Crossroads Block Grant.

Health homes	A service model that facilitates access to an interdisciplinary array of medical care, behavioral health care, and community-based social services and supports for both children and adults with chronic conditions. Services may include comprehensive care management; care coordination and health promotion; comprehensive transitional care from inpatient to other settings, including appropriate follow-up; individual and family support, which includes authorized representatives; referral to community and social support services, if relevant; and the use of health information technology to link services, as feasible and appropriate.	X			Regional Health Home is our CMHC. Funding included in block grant, adjusted as needed.
Home and vehicle modification	A service that provides physical modifications to the home or vehicle that directly address the medical health or remedial needs of the individual that are necessary to provide for the health, welfare, and safety of the member and to increase or maintain independence.	X		Lifetime limit equal to that established for the HCBS waiver for individuals with intellectual disabilities. Provider payment will be no lower than that provided through the HCBS waiver.	Will fund as required.
Home health aide services	Unskilled medical services which provide direct personal care. This service may include assistance with activities of daily living, such as helping the recipient to bathe, get in and out of bed, care for hair and teeth, exercise, and take medications specifically ordered by the physician.	X	X		Region will fund as appropriate

Job development	Services that assist individuals in preparing for, securing and maintaining gainful, competitive employment. Employment shall be integrated into normalized work settings, shall provide pay of at least minimum wage, and shall be based on the individual's skills, preferences, abilities, and talents. Services assist individuals seeking employment to develop or re-establish skills, attitudes, personal characteristics, interpersonal skills, work behaviors, and functional capacities to achieve positive employment outcomes.	X	X	Referral shall be within 60 days of request for such service.	102,500
Medication management	Services provided directly to or on behalf of the individual by a licensed professional as authorized by Iowa law including, but not limited to, monitoring effectiveness of and compliance with a medication regimen; coordination with care providers; investigating potentially negative or unintended psychopharmacologic or medical interactions; reviewing laboratory reports; and activities pursuant to licensed prescriber orders.	X			Included in Crossroads Block Grant. Other providers approved and funded as appropriate.

Medication prescribing	Services with the individual present provided by an appropriately licensed professional as authorized by Iowa law including, but not limited to, determining how the medication is affecting the individual; determining any drug interactions or adverse drug effects on the individual; determining the proper dosage level; and prescribing medication for the individual for the period of time before the individual is seen again.	X			Included in Crossroads Block Grant. Other service providers approved and funded as appropriate.
Mental health inpatient treatment	Acute inpatient mental health services are 24-hour settings that provide services to individuals with acute psychiatric conditions. Primary goal is to provide a comprehensive evaluation, rapidly stabilize acute symptoms, address health and safety needs and develop a comprehensive discharge plan to appropriate level of care.	X		Shall receive treatment within 24 hours if bed is available at any state or private mental health unit in Iowa at host region contractual rate. In the absence of a contract shall reimburse at the current Medicaid rate.	90,000
Mental health outpatient therapy	Services shall consist of evaluation and treatment services provided on an ambulatory basis for the target population including psychiatric evaluation, medication management and individual, family, and group therapy.	X		Urgent: within 1 hour of presentation or 24 hours of phone contact. Routine: within 4 weeks of request for appointment.	Included in Crossroads Block Grant. Other service providers approved and funded as appropriate

Peer support services	A program provided by a peer support specialist including but not limited to education and information, individual advocacy, family support groups, crisis response, and respite to assist individuals in achieving stability in the community.	X		Individuals receiving recovery services shall not have to travel more than 30 miles if residing in urban area or 45 miles if residing in rural area.	Included in Crossroads Block Grant
Personal emergency response system	An electronic device connected to a 24-hour staffed system which allows the individual to access assistance in the event of an emergency.	X			Will be approved and funded as needed.
Prevocational services	Services that focus on developing generalized skills that prepares an individual for employment. Prevocational training topics include but are not limited to attendance, safety skills, following directions, and staying on task.	X	X		27,500
Respite services	A temporary period of relief and support for individuals and their families provided in a variety of settings. The intent is to provide a safe environment with staff assistance for individuals who lack an adequate support system to address current issues related to a disability. Respite may be provided for a defined period of time; respite is either planned or provided in response to a crisis.	X	X		Will be approved and funded as appropriate

Supported employment	An approach to helping individuals participate as much as possible in competitive work in integrated work settings that are consistent with the strengths, resources, priorities, concerns, abilities, capabilities, interests, and informed choice of the individuals. Services are targeted for individuals with significant disabilities for whom competitive employment has not traditionally occurred; or for whom competitive employment has been interrupted or intermittent as a result of a significant disability including either individual or group supported employment, or both, consistent with evidence-based practice standards published by the Substance Abuse and Mental Health Services Administration.	X	X	Initial referral shall take place within 60 days of request	3,500
Supported community living services	Services provided in a noninstitutional setting to adult persons with mental illness, mental retardation, or developmental disabilities to meet the persons' daily living needs.	X	X	First appointment shall occur within 4 weeks of the request	50,000
Twenty four hour crisis response		X		Available through Community Mental Health Centers	
Commitment related (evaluations, sheriff transport, legal representation, mental health advocates)	Court ordered services related to mental health commitments	X		Court order	50,500

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Core Plus

Budget

Transportation	Needed Transportation	X			30,000.00
Residential care facilities	Community facility providing care and treatment	X			290,000

Standardized functional assessment must support the need for all services of the type and frequency identified in the individual's case plan.

	2016 MENTAL HEALTH BUDGET	
	SOUTHERN HILLS REGIONAL MENTAL HEALTH	
CODE	SERVICE	TOTAL
40-31354	Transportation (Non-Sheriff)	\$ 20,000.00
40-32-329	Supported Comm Living	\$ 50,000.00
40-42-305	Psychotherapeutic Treatment/Crossroads	\$ 140,000.00
40-50-360	Shelter Workshop Services/Voc	\$ 4,500.00
40-50-367	Day Hab	\$ 4,500.00
40-50-368	Support Employment Service	\$ 3,500.00
40-64-314	Comm Based Settings 6 +`Bed RCF	\$ 280,000.00
40-71-319	Inpatient/Hospital	\$ 40,000.00
40-73-319	Other Public/Private Hospitals	\$ 50,000.00
40-74-353	Commitment – Sheriff Transportation	\$ 20,000.00
40-74-393	Commitment – Legal Representation	\$ 20,000.00
40-75-395	Mental Health Advocate – General	\$ 10,500.00
42-31-354	Transportation /Relief	\$ 10,000.00
42-50-360	Shelter Workshop Services/Voc	\$ 125,500.00
42-64-314	Comm Based Settings RCF	\$ 10,000.00
44-11-100	Direct Admin – Salary Regular Employ	\$ 66,639.00
44-11-105	Salary – Other Help	\$ 49,017.00
44-11-106	Salary – Extra Help	\$ 20,000.00
44-11-110	FICA	\$ 10,377.00
44-11-111	IPERS	\$ 12,114.00
44-11-113	Health Insurance	\$ 31,600.00
44-11-260	Printing and Supplies	\$ 1,500.00
44-11-412	Postage	\$ 565.00
44-11-413	Travel Expense	\$ 5,000 .00
44-11-414	Telephone	\$ 3,000.00
44-11-444	Office Equipment/Main--Fax/Printer/Copier	\$ 1,200.00
44-11-447	Misc. Repairs/Maintenance	\$ 1,000.00
44-11-457	Rental	\$ 1,590.00
44-11-475	Rental/Office Space	\$ 1,276.00
44-11-480	Organization Dues	\$ 20,000.00
44-11-499	Misc. Expenses	\$ 1,000.00
44-12-399	Purchased Admin – Other	\$ 133,750.00

TOTAL		\$ 1,148,128.00
2016 REVENUES	FY16 Tax Dollars	
Adair County	\$ 309,000.00	
Adams County	\$ 185,000.00	
Taylor County	\$ 140,350.00	
Union County	\$ 565,000.00	
TOTAL	\$ 1,199,350.00	
GRAND TOTAL	\$1,199,350.00	

Financial Forecasting

Historical service utilization is the starting point for all financial projections. Throughout the year SHRMH staff, the regional advisory board and local stakeholders will identify unmet needs and areas for service development, and accounting for legislative action which will be incorporated into subsequent budgets.

Core Services without a budget line item will be funded for members of the eligible population. In some cases there has been no demand for county funding for these services so forecasting of projected cost is not feasible at this time.

Provider Reimbursement Provisions

Each service provider shall provide monthly billing invoices within 60 days of service provision, and other information requested of the provider for utilization review. The monthly billings shall include the following information:

- Name and unique identifier of each individual served during the reporting period.
- Dates of service.
- Number of units of service delivered to each individual served.
- When requested, attendance records.
- Unit rate and total cost of the units provided to each individual. Copayments or other charges billed to other sources shown as deductions on the billing.
- Actual amount to be charged to the Region for each individual for the period.

SHRMH staff shall review the billings and additional utilization information in comparison with service funding authorizations in place. Non-emergency services delivered without service funding authorization shall be deducted from the billing.

All eligible bills shall be paid within 60 days of receipt of required documentation unless unforeseen circumstances exist.

No billings received more than 60 days after the close of the fiscal year in which the service was provided shall be considered for payment by SHRMH unless there is a statutory obligation. Fiscal year for SHRMH is July 1 – June 30.

Reimbursements shall be made on a fee for service basis with the exception of Crossroads Mental Health Center which is funded through a block grant. If funds become available as provider reimbursements are reevaluated, small start-up grant(s) will be considered to add new services or expand population groups served.

Consumers must apply for and utilize all other sources of payment including private insurance and medical assistance before eligibility for regional funding will be considered.

SHRMH will contract with traditional providers and non-traditional providers to ensure core services are available within the region. A non-traditional provider may be an individual, organization and/or business who deliver services in the consumer's home and/or other community setting, and who typically do not provide MH/ID/DD services as part of their normal business.

SHRMH has identified the following providers currently contracting with the region. Additional providers may be added throughout the year as services are developed to meet the continuum of service needs of individuals.

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